

Form **8871**

Form 6  
(July 2000)

Department of the Treasury  
Internal Revenue Service

**Political Organization  
Notice of Section 527 Status**

OMS No. 1615-1692

## **Part I General Information**

- |   |   |
|---|---|
| 1 | Name of organization<br><b>CAMPAIGN TO ELECT JAMES L. EXLINE</b>  |
| 2 | Mailing address (P.O. Box or number, street and room or suite number)<br><b>224 DATURA STREET, SUITE 1313</b> |
| 3 | City or town, state, and ZIP code<br><b>WEST Palm BEACH, FL 33401</b>   |
| 4 | E-mail address of organization  |

Employee identification number  
*(Applied for)*

65-1029052

- |   |   |
|---|---|
| 4a Name of custodian of records<br><b>JAMES L. EXLINE</b> | 4b Custodian's address<br><b>5600 N. FLAGLER DRIVE, #2302<br/>WEST Palm Beach, FL 33407</b> |
| 5a Name of contact person<br><b>SAME</b>                  | 6b Contact person's address<br>_____  |

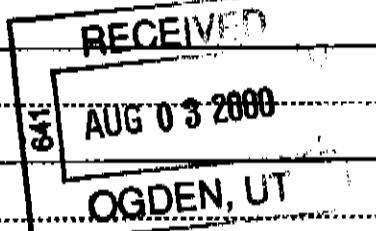
- 6 Business address of organization (if different from mailing address shown above). Number, street and room or suite number**  
**City or town, state, and ZIP code**

## **Part II Purpose**

- 7 Describe the purpose of the organization  
CAMPAGN FOR CITY COMMISSION DISTRICT I

**Part III List of All Related Entities (see instructions)**

Ba Name of related entity	Bb Relationship	Bc Address
N/A		



Form 8871 (7-2000)

Page 2

**List of All Officers, Directors, and Highly Compensated Employees (see instructions).**

Under penalties of perjury, I declare that the organization named in Part I is to be treated as an organization described in section 527 of the Internal Revenue Code, and that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

**Sign  
Here**

*[Signature]* Signature of authorized official

7/31/00

10